

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS  | ID NO.     | DATE            |
|---------------------------|-----------|------------|-----------------|
| FEE DETERMINATION         | <i>YG</i> | <i>656</i> | <i>12/30/00</i> |
| O.I.P.E. CLASSIFIER       |           |            |                 |
| FORMALITY REVIEW          |           |            |                 |
| RESPONSE FORMALITY REVIEW |           |            |                 |

### INDEX OF CLAIMS

✓ Rejected  
 = Allowed  
 - (Through numerals) Canceled  
 : Restricted

N Non-elected  
 I Interference  
 A Appeal  
 O Objected

| Claim    | Date | Claim    | Date | Claim    | Date |
|----------|------|----------|------|----------|------|
| Final    |      | Final    |      | Final    |      |
| Original |      | Original |      | Original |      |
| 1        |      | 1        |      | 101      |      |
| 2        |      | 2        |      | 102      |      |
| 3        |      | 3        |      | 103      |      |
| 4        |      | 4        |      | 104      |      |
| 5        |      | 5        |      | 105      |      |
| 6        |      | 6        |      | 106      |      |
| 7        |      | 7        |      | 107      |      |
| 8        |      | 8        |      | 108      |      |
| 9        |      | 9        |      | 109      |      |
| 10       |      | 10       |      | 110      |      |
| 11       |      | 11       |      | 111      |      |
| 12       |      | 12       |      | 112      |      |
| 13       |      | 13       |      | 113      |      |
| 14       |      | 14       |      | 114      |      |
| 15       |      | 15       |      | 115      |      |
| 16       |      | 16       |      | 116      |      |
| 17       |      | 17       |      | 117      |      |
| 18       |      | 18       |      | 118      |      |
| 19       |      | 19       |      | 119      |      |
| 20       |      | 20       |      | 120      |      |
| 21       |      | 21       |      | 121      |      |
| 22       |      | 22       |      | 122      |      |
| 23       |      | 23       |      | 123      |      |
| 24       |      | 24       |      | 124      |      |
| 25       |      | 25       |      | 125      |      |
| 26       |      | 26       |      | 126      |      |
| 27       |      | 27       |      | 127      |      |
| 28       |      | 28       |      | 128      |      |
| 29       |      | 29       |      | 129      |      |
| 30       |      | 30       |      | 130      |      |
| 31       |      | 31       |      | 131      |      |
| 32       |      | 32       |      | 132      |      |
| 33       |      | 33       |      | 133      |      |
| 34       |      | 34       |      | 134      |      |
| 35       |      | 35       |      | 135      |      |
| 36       |      | 36       |      | 136      |      |
| 37       |      | 37       |      | 137      |      |
| 38       |      | 38       |      | 138      |      |
| 39       |      | 39       |      | 139      |      |
| 40       |      | 40       |      | 140      |      |
| 41       |      | 41       |      | 141      |      |
| 42       |      | 42       |      | 142      |      |
| 43       |      | 43       |      | 143      |      |
| 44       |      | 44       |      | 144      |      |
| 45       |      | 45       |      | 145      |      |
| 46       |      | 46       |      | 146      |      |
| 47       |      | 47       |      | 147      |      |
| 48       |      | 48       |      | 148      |      |
| 49       |      | 49       |      | 149      |      |
| 50       |      | 50       |      | 150      |      |

If more than 150 claims or 10 actions  
staple additional sheet here

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